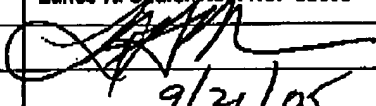



PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0851-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM		Application Number	
(to be used for all correspondence after initial filing)		09/990,085	
Total Number of Pages in This Submission		Filing Date	
18		11/21/2001	
ENCLOSURES (check all that apply)		First Named Inventor	
<input checked="" type="checkbox"/> Fee Transmittal Form		Radomir Mech	
<input type="checkbox"/> Fee Attached		Group Art Unit	
<input checked="" type="checkbox"/> Amendment / Reply		2671	
<input type="checkbox"/> After Final		Examiner Name	
<input type="checkbox"/> Affidavits/declaration(s)		Kimbinh T Nguyen	
<input checked="" type="checkbox"/> Extension of Time Request		Attorney Docket Number	
<input type="checkbox"/> Express Abandonment Request		MS1-1031US	
<input type="checkbox"/> Information Disclosure Statement			
<input type="checkbox"/> Certified Copy of Priority Documents			
<input type="checkbox"/> Response to Missing Parts/Incomplete Application			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
		Drawing(s)	
		Licensing-related Papers	
		Petition	
		Petition to Convert to a Provisional Application	
		Power of Attorney, Revocation	
		Change of Correspondence Address	
		Terminal Disclaimer	
		Request for Refund	
		CD, Number of CD(s)	
		After Allowance Communication to Group	
		Appeal Communication to Board of Appeals and Interferences	
		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
		Proprietary Information	
		Status Letter	
		Other Enclosure(s) (please identify below):	
Remarks			
		RECEIVED OICE/IAP SEP 22 2005	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual Name	Lance R. Sadler/Reg. No. 38605		
Signature			
Date	9/21/05		
CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Rebekah Glass		
Signature			Date
			9/21/05

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PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0891-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number 09/990,085 Filing Date 11/21/2001 First Named Inventor Radomir Mech Examiner Name Kimbinh T Nguyen Art Unit 2671 Attorney Docket No. MS1 1031US	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		RECEIVED CENTRAL FAX CENTER SEP 21 2005	
TOTAL AMOUNT OF PAYMENT (\$) 0.00			

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	50	=			
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP =	x	200	=			
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

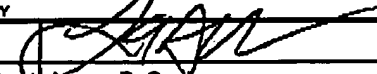
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fcc (no small entity discount)

Other:

SUBMITTED BY		
Signature 	Registration No. 38805 (Attorney/Agent)	Telephone (509) 324-9256
Name (Print/Type) Lance R. Sadler		Date 9/21/05

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